

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

Check if this is:

☐ An amended filing

Chapter you are filing under:

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a *joint case*--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**About Debtor 1:**Theresa

First name

L.

Middle name

French

Last name

Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**N/A

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years.**

Include your married or maiden names.

N/A

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

N/A

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

N/A

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

N/A

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

XXX-XX-8527

N/A

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years.

Include trade names and doing business as names.

☒ I have not used any business names or EINs

N/A

Business name

N/A

Business name

N/A

EIN

N/A

EIN

☐ I have not used any business names or EINs

N/A

Business name

N/A

Business name

N/A

EIN

N/A

EIN

5. Where you live

76 Woodland Ave

Number Street

Laconia NH 03246

City, State, Zip Code

Belknap

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

N/A

Number Street

City, State, Zip Code

If Debtor 2 lives at a different address:

N/A

EIN

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

N/A

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

N/A

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.*

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

**8. How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay Your Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?** ☒ No

☐ Yes

District N/A When \_\_\_\_\_ Case number \_\_\_\_\_  
MM/DD/YYYY

District N/A When \_\_\_\_\_ Case number \_\_\_\_\_  
MM/DD/YYYY

District N/A When \_\_\_\_\_ Case number \_\_\_\_\_  
MM/DD/YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No

☐ Yes

Debtor N/A Relationship \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM/DD/YYYY

Debtor N/A Relationship \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM/DD/YYYY

**11. Do you rent your residence?** ☐ No. Go to line 12.

☒ Yes. Has your landlord obtained an eviction judgment against you?

☒ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

- 12. Are you a sole proprietor of any full- or part-time business?** ☒ No. Go to Part 4.

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

- 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?** ☒ No.  
☐ Yes.

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

- 15. Tell the court whether you have received briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

## About Debtor 1:

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

<b>16. What kind of debts do you have?</b>	<p>16a. <b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input type="checkbox"/> No. Go to line 16b.  <input checked="" type="checkbox"/> Yes. Go to line 17.</p> <p>16b. <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</p> <p><input type="checkbox"/> No. Go to line 16c.  <input type="checkbox"/> Yes. Go to line 17.</p> <p>16c. State the type of debts you owe that are not consumer debts or business debts: <b>N/A</b></p>												
<b>17. Are you filing under Chapter 7?</b>  <b>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</b>	<p><input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.</p> <p><input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?</p> <p><input checked="" type="checkbox"/> No.  <input type="checkbox"/> Yes.</p>												
<b>18. How many creditors do you estimate that you owe?</b>	<table border="0"> <tr> <td><input checked="" type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 1,000 - 5,000</td> <td><input type="checkbox"/> 25,001 - 50,000</td> </tr> <tr> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 5,001 - 10,000</td> <td><input type="checkbox"/> 50,001 - 100,000</td> </tr> <tr> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 10,001 - 25,000</td> <td><input type="checkbox"/> More than 100,000</td> </tr> <tr> <td><input type="checkbox"/> 200-999</td> <td></td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000 - 5,000	<input type="checkbox"/> 25,001 - 50,000	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001 - 10,000	<input type="checkbox"/> 50,001 - 100,000	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001 - 25,000	<input type="checkbox"/> More than 100,000	<input type="checkbox"/> 200-999		
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<input type="checkbox"/> 200-999													
<b>19. How much do you estimate your assets to be worth?</b>	<table border="0"> <tr> <td><input checked="" type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> </tr> <tr> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$1,000,000,001 to \$10 billion</td> </tr> <tr> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$50,000,001, to \$100 million</td> <td><input type="checkbox"/> \$10,000,000,001 to \$50 billion</td> </tr> <tr> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> More than \$50 billion</td> </tr> </table>	<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$1,000,000,001 to \$10 billion	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$50,000,001, to \$100 million	<input type="checkbox"/> \$10,000,000,001 to \$50 billion	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> More than \$50 billion
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<b>20. How much do you estimate your liabilities to be?</b>	<table border="0"> <tr> <td><input checked="" type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> </tr> <tr> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$1,000,000,001 to \$10 billion</td> </tr> <tr> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$50,000,001, to \$100 million</td> <td><input type="checkbox"/> \$10,000,000,001 to \$50 billion</td> </tr> <tr> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> More than \$50 billion</td> </tr> </table>	<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$1,000,000,001 to \$10 billion	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$50,000,001, to \$100 million	<input type="checkbox"/> \$10,000,000,001 to \$50 billion	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> More than \$50 billion
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**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Theresa L. French

Debtor 1

01/22/2019

MM/DD/YYYY

**For your attorney, if you are represented by one**

*Note that BkAssist is licensed for use only by attorneys. If you are not represented by an attorney, you may not file this petition.*

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stanley H. Robinson

Attorney for Debtor(s)

01/22/2019

MM/DD/YYYY

**Stanley H. Robinson**

Printed name

**Law Office of Stanley H. Robinson**

Firm name

**PO Box 267**

Number Street

**Franklin NH 03235**

City, State, ZIP Code

**603 286-2019**

Contact phone

**BNH01389**

Bar number

**shrlawoffice@gmail.com**

Email address

**Fill in this information to identify your case:**Debtor 1 Theresa L. FrenchDebtor 2 \_\_\_\_\_  
(Spouse, if filing)United States Bankruptcy Court for the District of New HampshireCase number \_\_\_\_\_  
(If known)☐ Check if this is an amended filing**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy****04/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- ☐ Married  
☒ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☐ No  
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1	Dates Debtor 1 lived there	Debtor 2	Dates Debtor 2 lived there
55 June Circle	10/2015 to 10/2016	<input type="checkbox"/> Same as Debtor 1 N/A	<input type="checkbox"/> Same as Debtor 1 N/A to N/A
14 Stark Street, Belmont NH	10/2016 to 10/2017	<input type="checkbox"/> Same as Debtor 1 N/A	<input type="checkbox"/> Same as Debtor 1 N/A to N/A
10 Lower Bay Road, Sanbornton NH	10/2017 to 01/2019	<input type="checkbox"/> Same as Debtor 1 N/A	<input type="checkbox"/> Same as Debtor 1 N/A to N/A

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).



**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	<b>Sources of income</b> Check all that apply	<b>Sources of income</b> Check all that apply
	<b>Gross income</b> (before deductions and exclusions)	<b>Gross income</b> (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$1.00	
<b>For last calendar year:</b> (January 1 to December 31, 2017)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$37,225.00	
<b>For the calendar year before that:</b> (January 1 to December 31, 2016)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$33,755.00	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No  
☐ Yes. Fill in the details.

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425.00\* or more?

- ☐ No. Go to line 7.  
☐ Yes. List below each creditor to whom you paid a total of \$6,425.00\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 04/01/2019 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.  
☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
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Chrysler Credit PO Box 961275 Fort Worth, TX 76161	01/2019	\$1,329.00	\$15,539.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Lease</u>
E&M Property Management	01/2019	\$3,300.00		<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Other</u>
Garrett Walter, MD	12/04/2018	\$845.00		<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Medical</u>

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**  
*Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.*

☒ No  
☐ Yes. List all payments to an insider

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.  
☒ No  
☐ Yes. List all payments that benefited an insider.

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No  
☐ Yes. Fill in the details

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

☒ No  
☐ Yes. Fill in the details

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

☒ No  
☐ Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details of each gift or contribution

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details

#### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details

Person who was paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Stanley H. Robinson PO Box 267 Franklin, NH 03235  Email or website address: <b>shrlawoffice@gmail.com</b>  Person Who Made the Payment if Not You:	Expense & fee retainer (including any retainer for the filing fee)	12/14/2018	\$1,595.00
Greenpath 3500 Corporate Drive Farmington, MI 48331  Email or website address: <b>www.greenpathBK.com</b>  Person Who Made the Payment if Not You:	Fee for § 109(h)(1) briefing by approved nonprofit budget and credit counseling agency	12/18/2018	\$25.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- ☒ No  
☐ Yes. Fill in the details.

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No  
☐ Yes. Fill in the details.

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns?** Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No  
☒ Yes. Fill in the details.

Who owns the property?	Where is the property?	Describe the property	Value
Chruysler Credit Corporation		2019 Dodge Ram Truck-Leased vehicle-ACV \$30,000	\$30,000.00

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No  
☐ Yes. Fill in the details

**25. Have you notified any governmental unit of any release of hazardous material?**

- ☒ No  
☐ Yes. Fill in the details

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No  
☐ Yes. Fill in the details

**Part 11: Give Details About Your Business or Connections to Any Business****27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

- ☒ No  
☐ Yes. Fill in the details below.

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Theresa L. French

Signature of Debtor 1

01/22/2019

Date

\_\_\_\_\_  
 Signature of Debtor 2

01/22/2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of person **N/A -- the BkAssist software used to prepare this petition is licensed for use only by attorneys.**

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land or Other Real Estate You Own or Have an Interest in****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ....**

--

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No.  
☒ Yes.

3.1 Make: Dodge

Model: Ram truck

Year: 2019

Approximate mileage: \_\_\_\_\_

Other information: ; **Fee**

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$30,000.00	\$15,539.00

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

- ☒ No.  
☐ Yes.

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here .....**

\$15,539.00
-------------

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?** (List the current value of the portion you own. Do not deduct secured claims or exemptions)

**6. Household goods and furnishings**

*Examples: Major appliances, furniture, linens, china, kitchenware*

☐ No

☒ Yes (**Usual and customary household furniture and furnishings \$1,000.00, D1**) ..... **\$1,000.00**

**7. Electronics**

*Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games*

☐ No

☒ Yes (**2 televisions (10 years) \$100.00, D1**) ..... **\$100.00**

**8. Collectibles of value**

*Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles*

☒ No

☐ Yes .....

**9. Equipment for sports and hobbies**

*Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments*

☒ No

☐ Yes .....

**10. Firearms**

*Examples: Pistols, rifles, shotguns, ammunition, and related equipment*

☒ No

☐ Yes .....

**11. Clothes**

*Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories*

☐ No

☒ Yes (**Clothing and footwear \$400.00, D1**) ..... **\$400.00**

**12. Jewelry**

*Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver*

☒ No

☐ Yes .....

**13. Non-farm animals**

*Examples: Dogs, cats, birds, horses*

☒ No

☐ Yes .....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes .....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$1,500.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?** (List the current value of the portion you own. Do not deduct secured claims or exemptions)

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No  
☐ Yes ..... **\$0.00**

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No  
☒ Yes **Franklin SB-checking \$2,777.00 (D1)** ..... **\$2,777.00**

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No  
☐ Yes ..... **\$0.00**

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No  
☐ Yes ..... **\$0.00**

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No  
☐ Yes ..... **\$0.00**

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No  
☒ Yes **Mass Mutual 403(b) Retirement Savings Plan \$213.39 (D1)** ..... **\$213.39**

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company.  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No  
☐ Yes ..... **\$0.00**

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

☒ No  
☐ Yes ..... **\$0.00**

**24. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified state tuition plan as defined in 26 U.S.C. § 529(b)(1).**

☒ No  
☐ Yes ..... **\$0.00**

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No  
☐ Yes ..... **\$0.00**

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No  
☐ Yes ..... **\$0.00**



**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No  
☐ Yes ..... **\$0.00**

**28. Tax refunds owed to you**

Give specific information about them, including whether you already filed the returns and the tax years

☒ No  
☐ Yes ..... **\$0.00**

**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No  
☐ Yes ..... **\$0.00**

**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No  
☐ Yes ..... **\$0.00**

**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance. Name the insurance company of each policy and the beneficiary, and list its value

☒ No  
☐ Yes ..... **\$0.00**

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No  
☐ Yes ..... **\$0.00**

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue

☒ No  
☐ Yes ..... **\$0.00**

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☒ No  
☐ Yes ..... **\$0.00**

**35. Any financial assets you did not already list**

☒ No  
☐ Yes ..... **\$0.00**

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here .....****\$2,990.39****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to part 6.  
☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*

- ☒ No  
☐ Yes ..... **\$0.00**

**54. Add the dollar value of all of your entries from Part 7, including any entries for pages you have attached for Part 7. Write that number here .....****Part 8: List the Totals of Each Part of this Form**

<b>55. Part 1: Total real estate, line 2 .....</b>	_____
<b>56. Part 2: Total vehicles, line 5.....</b>	<b>\$15,539.00</b>
<b>57. Part 3: Total personal and household items, line 15 .....</b>	<b>\$1,500.00</b>
<b>58. Part 4: Total financial assets, line 36 .....</b>	<b>\$2,990.39</b>
<b>59. Part 5: Total business-related property, line 45.....</b>	_____
<b>60. Part 6: Total farm- and fishing-related property, line 52 .....</b>	_____
<b>61. Part 7: Total other property not listed, line 54 .....</b>	_____
<b>62. Total personal property. Add lines 56 through 61 .....</b>	<b>\$20,029.39</b>
<b>63. Total of all property on Schedule A/B. Add line 55 + line 62 .....</b>	<b>\$20,029.39</b>

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 106C****Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming New Hampshire Exemptions and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <i>Copy the value from Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption</i>	Specific laws that allow exemption
Usual and customary household furniture and furnishings (Line 6)	\$1,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.H. Rev. Stat. § 511:2, III
2 televisions (10 years) (Line 7)	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.H. Rev. Stat. § 511:2, XVIII
Clothing and footwear (Line 11)	\$400.00	<input checked="" type="checkbox"/> \$400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.H. Rev. Stat. § 511:2, I
Franklin SB-checking (Line 17)	\$2,777.00	<input checked="" type="checkbox"/> \$2,777.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.H. Rev. Stat. § 511:2, XVIII
Mass Mutual 403(b) Retirement Savings Plan (Line 21)	\$213.39	<input checked="" type="checkbox"/> \$213.39 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
<b>Total</b>	<b>\$4,490.39</b>	<b>\$4,490.39</b>	

**3. Are you claiming a homestead exemption of more than \$160,375.00?**

(Subject to adjustment on 04/01/2019 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No☐ Yes

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 106D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☒ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims****2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	<i>Column A</i> <b>Amount of claim</b> <small>Do not deduct the value of the collateral</small>	<i>Column B</i> <b>Value of collateral that supports this claim</b>	<i>Column C</i> <b>Unsecured portion</b> <small>if any</small>
Add the dollar value of your entries in Column A. Write that number here: .....	<b>\$0.00</b>		

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 106E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

- ☒ No. Go to Part 2.  
☐ Yes.

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.**Total claim**

**4.1**  
**Anthem Blue Cross**  
Nonpriority Creditor's Name  
**Central Region-CCOA Lockbox**  
Number Street  
**PO Box 73651**  
**Cleveland OH 44193-1177**  
City, State, ZIP Code  
**Who incurred the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
**Is the claim subject to offset?**  
☒ No  
☐ Yes

Last 4 digits of account number: **2465**

\$211.72

When was the debt incurred: **06/2018**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Medical**

Debtor 1 Theresa L. French

Case number:

		Total claim
<b>4.2</b> <b>Capital One Bank</b> <hr/> Nonpriority Creditor's Name <b>15000 capital One Drive</b> <hr/> Number Street <hr/> <b>Richmond VA 23238</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9931</b>  When was the debt incurred: <b>02/2003</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$3,112.00
<b>4.3</b> <b>Capital One Bank</b> <hr/> Nonpriority Creditor's Name <b>15000 capital One Drive</b> <hr/> Number Street <hr/> <b>Richmond VA 23238</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-8820</b>  When was the debt incurred: <b>11/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>CreditCard</b>	\$5,820.00
<b>4.4</b> <b>Capital Orthopaedic Surgery</b> <hr/> Nonpriority Creditor's Name <b>264 Pleasant Street</b> <hr/> Number Street <hr/> <b>Concord NH 03301</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number:  When was the debt incurred: <b>01/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$454.09
<b>4.5</b> <b>Chase Card</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 15298</b> <hr/> Number Street <hr/> <b>Wilmington DE 19850</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9188</b>  When was the debt incurred: <b>03/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$2,703.00

Debtor 1 Theresa L. French

Case number:

		Total claim
<b>4.6</b> <b>Chase Card</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 15298</b> <hr/> Number Street <hr/> <b>Wilmington DE 19850</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-0016</b>  When was the debt incurred: <b>12/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$1,580.00
<b>4.7</b> <b>Citi</b> <hr/> Nonpriority Creditor's Name <b>PO Box 6241</b> <hr/> Number Street <hr/> <b>Sioux Falls SD 57117</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-8778</b>  When was the debt incurred: <b>03/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$2,906.00
<b>4.8</b> <b>Comenitybank Victoria</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 182789</b> <hr/> Number Street <hr/> <b>Columbus OH 43218</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9974</b>  When was the debt incurred: <b>04/2015</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$226.00
<b>4.9</b> <b>Finfit</b> <hr/> Nonpriority Creditor's Name <b>272 Bendix Rd</b> <hr/> Number Street <hr/> <b>Virginia Beach VA 23452</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-2708</b>  When was the debt incurred: <b>05/18/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other</b>	\$1,237.00



Debtor 1 Theresa L. French

Case number:

		Total claim
<b>4.10</b> <b>Finfit</b> Nonpriority Creditor's Name <b>272 Bendix Rd</b> Number Street  <b>Virginia Beach VA 23452</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3580</b>  When was the debt incurred: <b>09/13/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other</b>	\$1,560.00
<b>4.11</b> <b>GM Financial</b> Nonpriority Creditor's Name <b>PO Box 181145</b> Number Street  <b>Arlington TX 76096</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3554</b>  When was the debt incurred: <b>04/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Deficiency</b>	\$6,059.00
<b>4.12</b> <b>Lakes Region Radiology</b> Nonpriority Creditor's Name <b>PO Box 371863</b> Number Street  <b>Pittsburgh PA 15250</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>4386</b>  When was the debt incurred: <b>09/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$19.93
<b>4.13</b> <b>LRGHealthcare</b> Nonpriority Creditor's Name <b>80 Highland Street</b> Number Street  <b>Laconia NH 03246</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>5034</b>  When was the debt incurred: <b>09/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$3,200.00

Debtor 1 Theresa L. French

Case number:

		Total claim
<b>4.14</b> <b>Makes Cents Inc d/b/a MaxLend</b> <hr/> Nonpriority Creditor's Name <b>217 3rd Avenue NE</b> <hr/> Number Street <hr/> <b>Parshall ND 58770</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: _____  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Personal Loan</b>	\$1,400.00
<b>4.15</b> <b>THD/Cbna</b> <hr/> Nonpriority Creditor's Name <b>PO Box 6497</b> <hr/> Number Street <hr/> <b>Sioux Falls SD 57117</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-0444</b>  When was the debt incurred: <b>09/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$498.00

**Part 3: List Others to Be Notified for a Debt That You Already Listed**

**5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.**

<b>1</b> <b>Capital One Bank</b> <hr/> Creditor's Name <b>PO Box 30285</b> <hr/> Number Street <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.2</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number: _____
<b>2</b> <b>Capital One Bank</b> <hr/> Creditor's Name <b>PO Box 30285</b> <hr/> Number Street <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.3</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number: _____

Debtor 1 Theresa L. French

Case number:

**3****Capital One Bank Usa N**

Creditor's Name

**15000 Capital One Dr**

Number Street

**Richmond VA 23238**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**4****Capital One Bank Usa N**

Creditor's Name

**15000 Capital One Dr**

Number Street

**Richmond VA 23238**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**5****Capital Orthopaedic Surgery**

Creditor's Name

**PO Box 10179**

Number Street

**Concord NH 03301-0179**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**6****Citi**

Creditor's Name

**P.O. Box 6217**

Number Street

**Sioux Falls SD 57117**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**7****Comenitybank Venus**

Creditor's Name

**P.O. Box 182789**

Number Street

**Columbus OH 43218**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**8****LRGHeathcare Patient Financial Svcs**

Creditor's Name

**PO Box 4167**

Number Street

**Woburn MA 01888-4167**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Part 4:****Add the Amounts for Each Type of Unsecured Claim**

- 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.**  
**Add the amounts for each type of unsecured claim.**

**Total claim**

<b>Total claims from Part 1</b>	<b>6a. Domestic support obligations .....</b>	<b>6a. _____ \$0.00</b>
	<b>6b. Taxes and certain other debts you owe the government .....</b>	<b>6b. _____ \$0.00</b>
	<b>6c. Claims for death or personal injury while you were intoxicated.....</b>	<b>6c. _____ \$0.00</b>
	<b>6d. Other.</b> Add all other priority unsecured claims. Write that amount here.....	<b>6d. _____ \$0.00</b>
	<b>6e. Total</b> Add lines 6a through 6d. ....	<b>6e. _____ \$0.00</b>
<b>Total claims from Part 2</b>	<b>6f. Student loans .....</b>	<b>6f. _____ \$0.00</b>
	<b>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims .....</b>	<b>6g. _____ \$0.00</b>
	<b>6h. Debts to pension or profit-sharing plans, and other similar debts.....</b>	<b>6h. _____ \$0.00</b>
	<b>6i. Other.</b> Add all other nonpriority unsecured claims. Write that amount here.....	<b>6i. _____ \$30,986.74</b>
	<b>6j. Total.</b> Add lines 6f through 6i. ....	<b>6j. _____ \$30,986.74</b>

**Fill in this information to identify your case:**Debtor 1 Theresa L. FrenchDebtor 2 \_\_\_\_\_  
(Spouse, if filing)United States Bankruptcy Court for the District of New HampshireCase number \_\_\_\_\_  
(If known)☐ Check if this is an amended filing**Official Form 106G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☒ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

Person or company with whom you have the contract or lease	State what the contract or lease is for
<b>2</b> <b>Chrysler Credit</b> Creditor's Name <b>PO Box 961275</b> Number Street  <b>Fort Worth TX 76161</b> City, State, ZIP Code	<b>Lease of 2019 Dodge Ram Truck-Leased vehicle-ACV \$30,000</b>

**Fill in this information to identify your case:**Debtor 1 Theresa L. FrenchDebtor 2 \_\_\_\_\_  
(Spouse, if filing)United States Bankruptcy Court for the District of New HampshireCase number \_\_\_\_\_  
(If known)☐ Check if this is an amended filing**Official Form 106H  
Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No  
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☒ No  
☐ Yes. In which community state or territory did you live? . Fill in the name and current address of that person.

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

*Column 1: Your codebtor**Column 2: The creditor to whom you owe the debt*

Check all schedules that apply

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of

## Official Form 106I

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

1. Fill in your employment information	Employment status	Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	<b>Occupation</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	<b>Employer's name</b>	Human Resource Asst	N/A
	<b>Employer's address</b>	Health First Family Care 841 Central Street Franklin, NH 03235	N/A
	<b>How long employed there?</b>	4 years	N/A

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Including your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$2,848.99	
3. Estimate and list monthly overtime pay.	\$0.00	
4. Calculate gross income. Add line 2 + line 3.	\$2,848.99	
5. List All payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$384.04	
5b. Mandatory contributions for retirement plans	\$0.00	

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>5c. Voluntary contributions for retirement plans</b>	5c. \$0.00	
<b>5d. Required repayments of retirement fund loans</b>	5d. \$0.00	
<b>5e. Insurance</b>	5e. \$133.72	
<b>5f. Domestic support obligations</b>	5f. \$0.00	
<b>5g. Union dues</b>	5g. \$0.00	
<b>5h. Other deductions.</b> Specify:	5h. \$0.00	
<b>6. Add the payroll deductions.</b> Add lines 5a through 5h	6. \$517.76	
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$2,331.23	
<b>8. List all other income regularly received:</b>		
<b>8a. Net income from rental property and from operating a business, profession, or farm</b>  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$0.00	
<b>8b. Interest and dividends</b>	8b. \$0.00	
<b>8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive</b>  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$0.00	
<b>8d. Unemployment compensation</b>	8d. \$0.00	
<b>8e. Social Security</b>	8e. \$0.00	
<b>8f. Other government assistance that you regularly receive</b>  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$0.00	
<b>8g. Pension or retirement income</b>	8g. \$0.00	
<b>8h. Other monthly income.</b> Specify:	8h. \$0.00	
<b>9. Add all other income.</b> Add lines 8a-8h.	9. \$0.00	
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 9 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$2,331.23	
<b>11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> (Official Form 106J).</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> (Official Form 106J).  Specify:	11. \$0.00	
<b>12. Add the amounts on lines 10 and 11.</b> The result is the combined monthly income. Also write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> (Official Form 106Sum) if it applies.	12. \$2,331.23	



13. Do you expect an increase or decrease within the year after you file this form?

- ☒ No  
☐ Yes.  
Explain.....

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of

## Official Form 106J

# Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No.
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*

**2. Do you have dependents?**

Do not list Debtor 1 or Debtor 2.

Do not state the dependents' names.

- ☒ No
- ☐ Yes. Fill out this information for each dependent

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as your bankruptcy filing date unless you are using this form as supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date

Include expenses paid for with non-cash governmental assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I).

**Note:** Expenses for property other than the debtor(s)' primary residence(s), if any, are reported in the Summary of Business/Real-Estate Income & Expense annexed to Schedule I.

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

4. **\$1,100.00**

If not included in line 4:

**4a. Real estate taxes**

4a.

**4b. Property, homeowner's, or renter's insurance**

4b.

**\$10.00****4c. Home maintenance, repair, and upkeep expenses**

4c.

		Your expenses
4d. Homeowner's association or condominium dues	4d.	
5. Additional mortgage payments for your residence, such as home equity loans	5.	
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	
6b. Water, sewer, garbage collection	6b.	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$203.00
6d. Other. Specify: N/A	6d.	
7. Food and housekeeping supplies	7.	\$400.00
8. Childcare and children's education costs	8.	
9. Clothing, laundry, and dry cleaning	9.	\$50.00
10. Personal care products and services	10.	\$75.00
11. Medical and dental expenses	11.	\$300.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$250.00
13. Entertainment, clubs, recreation, newspapers, magazine, and books	13.	\$100.00
14. Charitable contributions and religious donations	14.	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	
15b. Health insurance	15b.	
15c. Vehicle insurance	15c.	\$110.00
15d. Other insurance. Specify: N/A	15d.	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.	
17. Installment or lease payments		
17a. Lease (2019 Dodge Ram Truck-Leased vehicle-ACV \$30,000)	17a.	\$443.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> (Official Form 106I)	18.	
19. Other payments you make to support others who do not live with you. Specify: N/A	19.	
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I</i> (Official Form 106I)		
20a. Mortgages on other property	20a.	
20b. Real estate taxes	20b.	
20c. Property, homeowner's, or renter's insurance	20c.	
20d. Maintenance, repair, and upkeep expenses	20d.	
20e. Homeowner's association or condominium dues	20e.	
20f. Other. Specify:	20f.	
21. Other. Specify: N/A	21.	

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. **\$3,041.00**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b.

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. **\$3,041.00****23. Calculate your monthly net income**23a. Copy line 12 (*your combined monthly income*) from Schedule I23a. **\$2,331.23**

23b. Copy your monthly expenses from line 22 above.

23b. **\$3,041.00**23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*23c. **(\$709.77)****24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No  
☐ Yes.  
 Explain.....

## Fill in this information to identify your case:

Debtor 1 Theresa L. FrenchDebtor 2  
(Spouse, if filing)United States Bankruptcy Court for the District of New HampshireCase number  
(If known)

## Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The presumption of abuse will be calculated under *Chapter 7 Means Test Calculation* (Official Form 122A-2)
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

## Official Form 122A-1

## Chapter 7 Statement of Your Current Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

## Part 1: Calculate Your Current Monthly Income

## 1. What is your marital and filing status? Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2
2.	<b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	\$3,102.15	
3.	<b>Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	\$0.00	
4.	<b>All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	
5.	<b>Net income from operating a business, profession, or farm</b>		
	Gross receipts (before all deductions)	\$0.00	
	Ordinary and necessary operating expenses	\$0.00	
	Net monthly income from a business, profession, or farm	\$0.00	

**6. Net income from rental and other real property**

Gross receipts (before all deductions)	<b>\$0.00</b>
Ordinary and necessary operating expenses	<b>\$0.00</b>

Net monthly income from rental or other real property 6. **\$0.00**

**7. Interest, dividends, and royalties**

7. **\$0.00**

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you	<b>\$0.00</b>
For your spouse	<b>\$0.00</b>

8. **\$0.00**

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

9. **\$0.00**

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.

10. **\$0.00**

**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column: \$3,102.15 + N/A. Then add the total for Column A to the total for Column B.

11. **\$3,102.15**

**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year.** Follow these steps:

Copy your total current monthly income from line 11. **\$3,102.15**

Multiply by 12 (the number of months in a year). **\$37,225.80**

The result is your annual income for this part of the form.

12. **\$37,225.80**

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

**New Hampshire**

Fill in the number of people in your household.

**1**

Fill in the median family income for your state and size of household.

**\$63,898.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

13. **\$63,898.00**

**14. How do the lines compare?**

14a. ☒ Line 12 is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3.

14b. ☐ Line 12 is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*. Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

/s/ Theresa L. French

Signature of Debtor 1

01/22/2019

Date MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets**

	<b>Your assets</b> Value of what you own
<b>1. Schedule A/B: Property</b> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$4,490.39</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$4,490.39</u>

**Part 2: Summarize Your Liabilities**

	<b>Your liabilities</b> Amount you owe
<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$0.00</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>\$30,986.74</u>
<b>Your total liabilities</b>	<u>\$30,986.74</u>

**Part 3: Summarize Your Income and Expenses**

<b>4. Schedule I: Your Income</b> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$2,331.23</u>
<b>5. Schedule J: Your Expenses</b> (Official Form 106J)	
Copy your monthly expenses from line 22, Column A, of <i>Schedule J</i> .....	<u>\$3,041.00</u>

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9 for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income** (Official Form 122A-1, 122B, or 122C-1):Copy your total current monthly income from line 11..... \$3,102.15**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**.....**From Part 4 on Schedule E/F, copy the following:****Total claim**

9a. Domestic support obligations (Copy line 6a.).....	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.).....	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) .....	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.).....	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.).....	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.).....	<u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.....	<u>\$0.00</u>



**Fill in this information to identify your case:**Debtor 1 Theresa L. FrenchDebtor 2 \_\_\_\_\_  
(Spouse, if filing)United States Bankruptcy Court for the District of New HampshireCase number \_\_\_\_\_  
(If known)☐ Check if this is an amended filing**Official Form 106Dec****Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

☒ No☐ Yes. Name of person N/A. Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**

/s/ Theresa L. French  
Signature of Debtor 101/22/2019  
Date\_\_\_\_\_  
Signature of Debtor 201/22/2019  
Date

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement disclosing additional payments or agreements as of

**Form BKA-2030****Disclosure of Compensation of Attorney for Debtor**

12/15

Use this procedural form, if desired, to disclose the matters enumerated in 11 U.S.C. § 329 and Fed. R. Bankr. P. 2016(b).

Disclosure is required within 14 days after the order for relief or another time as the court may direct. A supplemental disclosure is required within 14 days after any payment or agreement not previously disclosed.

Attach a copy of the retainer agreement, if any.

**Part 1: Compensation**

For legal services, I have agreed to accept..... **\$1,200.00**

Prior to the filing of this statement I have received

Retainer for legal services..... **\$1,200.00**

Retainer for expenses, including the court filing fee ..... **\$395.00**

Balance Due ..... **\$0.00**

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify) ☒ N/A

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

**Part 2: Services**

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy.
- Preparation and filing of any petition, schedules, statement of affairs and plan that may be required.
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof.
- ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters.~~

e.

f.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**(None)**

7. A copy of my retainer agreement ☐ is ☒ is not attached.

**Part 3: Certification**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

/s/ Stanley H. Robinson

Stanley H. Robinson (Law Office of Stanley H. Robinson)

01/22/2019

Date

**Fill in this information to identify your case:**

Debtor 1 Theresa L. French

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the District of New Hampshire

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 108****Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property lease	Will the lease be assumed?
Chrysler Credit Corporation	<input type="checkbox"/> No
2019 Dodge Ram Truck-Leased vehicle-ACV \$30,000	<input checked="" type="checkbox"/> Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

/s/ Theresa L. French  
Signature of Debtor 1

01/22/2019  
Date

\_\_\_\_\_  
Signature of Debtor 2

01/22/2019  
Date

Debtor 1 Theresa L. French

Case number:

**United States Bankruptcy Court  
District of New Hampshire  
Manchester Division**

In re: **French, Theresa**

Case No.

**VERIFICATION OF CREDITOR MAILING LIST**

The above named Debtor hereby certifies under penalty of perjury that the attached master mailing list of creditors, consisting of 26 names and addresses, is complete, correct and consistent with the Debtor's schedules pursuant to Local Bankruptcy Rules and assumes all responsibility for errors and omissions.

/s/ Theresa L. French  
Debtor

01/22/2019  
Date

Americredit Financial  
PO Box 183853  
Arlington, TX 76096

Anthem Blue Cross  
Central Region-CCOA Lockbox  
PO Box 73651  
Cleveland, OH 44193-1177

Capital One Bank  
15000 capital One Drive  
Richmond, VA 23238

Capital One Bank  
PO Box 30285  
Salt Lake City, UT 84130

Capital One Bank Usa N  
15000 Capital One Dr  
Richmond, VA 23238

Capital Orthopaedic Surgery  
264 Pleasant Street  
Concord, NH 03301

Capital Orthopaedic Surgery  
PO Box 10179  
Concord, NH 03301-0179

Chase Card  
P.O. Box 15298  
Wilmington, DE 19850

Chrysler Capital  
P.O. Box 961275  
Fort Worth, TX 76161

Chrysler Credit  
PO Box 961275  
Fort Worth, TX 76161

Citi  
P.O. Box 6217  
Sioux Falls, SD 57117

Citi  
PO Box 6241  
Sioux Falls, SD 57117

Comenitybank Venus  
P.O. Box 182789  
Columbus, OH 43218

Comenitybank Victoria  
P.O. Box 182789  
Columbus, OH 43218

Finfit  
272 Bendix Rd  
Virginia Beach, VA 23452

GM Financial  
PO Box 181145  
Arlington, TX 76096

Harvey Building Products  
1400 Main Street  
Waltham, MA 02451

Lakes Region Radiology  
PO Box 371863  
Pittsburgh, PA 15250

LRGHealtcare  
80 Highland Street  
Laconia, NH 03246

LRGHeathcare Patient Financial Srvs  
PO Box 4167  
Woburn, MA 01888-4167

Makes Cents Inc d/b/a MaxLend  
217 3rd Avenue NE  
Parshall, ND 58770

Midland Funding  
2365 Northside drive  
Ste 30  
San Diego, CA 92108



Midland Funding  
8875 Aero Drive  
San Diego, CA 92123

THD/Cbna  
PO Box 6497  
Sioux Falls, SD 57117

Wide Merchant Investment  
3850 Wilshire Blvd  
Suite 160  
Los Angeles, CA 90010